YOUTH SERVICES DEPARTMENT OF CORRECTIONS



TO:

STEVE GIBSON. DIVISION ADMINISTRATOR

STATE OF MONTANA

1539 11th Avenue PO Box 201301 Helena, MT 59620-1301 TELEPHONE: (406) 444-0851 FAX: (406) 444-0522

Youth

FROM: JPO

DATE:

RE: Duty to Register Sexual or Violent Offender

You are required to register as a sexual/violent offender. If you live within the city limits of a city you must register with the city police department. If you do not live within the city limits of a city you must register with the sheriff's office of the county in which you live.

If you move you must register within 3 business days of entering a county of this state for the purpose of residing or setting up a temporary residence for 10 days or more or for an aggregate period exceeding 30 days in a calendar year.

The law also requires you to be fingerprinted and photographed. You must pay the costs of registration, if you are able to do so. If you are convicted of a sexual offense registration is for life. If you are convicted of a violent offense registration is for 10 years, but if you are convicted of any other felony offense during that time you will be required to register for life.

If you are a violent offender you may petition the District Court for relief from the registration requirement after 10 years of clean conduct. If you are a level 1 sexual offender you may petition the District Court for relief from the registration requirement after 10 years of clean conduct. If you are a level 2 sexual offender you may petition the District Court for relief from the registration requirement after 25 years of clean conduct. If you are a level 3 sexual offender you may not petition the District Court for relief from the registration requirement.

Finally, the act requires the Department of Corrections to notify appropriate offenders of the registration requirement in writing. This letter fulfills that requirement.

Failure to comply with the requirements of this law may be punished by a prison term up to five years and/or a \$10,000 fine.

Youth's Signature:			Youth ID:	
Witness' Signature:			Date:	
Address:		City:		
County:	Zip Code:	Telephone Number:		
Vehicle:				